UNITED STATES DEPARTMENT OF AGRICULTURE CASE NUMBER: ANIMAL AND PLANT HEALTH INSPECTION SERVICE NC150007 VIOLATOR: Gryphon Group Combat Trauma Division ALTER. OFFICIAL WARNING Customer# 331166 VIOLATION OF FEDERAL REGULATIONS License# 55-R-0145 ADDRESS (Street, City, State, ZIP Code): 16780 Airbase Rd Laurinburg Maxton Airport, Maxton, NC 28364 The U.S. Department of Agriculture has evidence that on or about December 1, 2014, you or your organization committed violations of the following sections of the Code of Federal Regulations, Title 9: 2.36(a) Annual Report The reporting facility shall be that segment of the research facility, or that department, agency, or instrumentality of the United States, that uses or intends to use live animals in research, test, experiments, or for teaching. Each reporting facility shall submit an animal report to the AC Regional Director for the State where the facility is located on or before December 1 of each calendar year. The report shoal be signed and certified by the CEO or Institutional Officer, and shall cover the previous Federal fiscal year. You failed to submit a 2014 Annual Report for the research facility in a timely manner.

The Animal and Plant Health Inspection Service (APHIS) created federal regulations to ensure the welfare of animals and help prevent the spread of animal and plant pests and diseases. Since violations of the regulations can have serious and costly impacts that are detrimental to the public interest, APHIS is providing you with an Official Warning for the violation(s) described above. Any further violation of these federal regulations may result in the assessment of a civil penalty, criminal prosecution, or other sanctions. If you have any questions concerning this Official Warning or violation(s), please contact the APHIS official listed in this notice.

APHIS OFFICIAL (Name and Title):	of violation(s), please contact the APTHS of		
	OFFICE ADDRESS:	OFFICE ADDRESS:	
Chester A. Gipson	4700 River Road		
Deputy Administrator	Riverdale, MD 30737		
Animal Care			
SIGNATURE:	DATE ISSUED: [DATE]	TELEPHONE NO: (919) 855-7100	
CERTIFIED MAIL REGELFT NO:			
7013 0600 0000 7385 3456			

APHIS FORM 7060

Previous editions may be used

Rev. September 2011